PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10849772

	CLAIMS AS FILED - PART I (Column 1) (Column 2)								<u> </u>	<u> </u>	<u>′ </u>	/ . /	
									L ENTIT	Υ		ОТН	ER THAI
TOTAL CLAIMS			1	(Column 1)		lumn 2)	2)		TYPE			SMALL ENTIT	
Ļ	FOR							RAT		EE	1	RATE	FEI
L				NUMBER FILED N		BER EXTRA	_	BASIC	FEE 38	5.00	OR	BASIC F	EE 770.0
	OTAL CHARG	SEABLE CLAIM	s p	minus 20=	• /	<u>//</u>	4	XS 9	=		OR	X\$18:	
_	DEPENDENT			minus 3 =				X43:	<u> </u>			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
М	ULTIPLE DEF	PENDENT CLAIN	√PRESÈN'	RESENT _			7			╌┤	OR	7,002	+
* 1	f the differen	ce in column 1	is less tha	an zero, enter	"0" in	column 2		+145			OR	+290=	
		CLAIMS AS				00.0.1 2		TOTA	L		OR	TOTAL	77
		(Column 1		Colum		(Column 3	١	SMAL	L ENTIT	V c	OR.		R THAN . ENTITY
_		CLAIMS		HIGHE		1	5 F			`	/n F	SWALL	CHILLY
AMENOMENT A		REMAINING AFTER AMENDMEN		NUMB PREVIOU PAID F	JSLY	PRESENT EXTRA	$\ \ $	RATE	ADE TION FEI	AL		RATE	ADDI TIONA FEE
ב ב ב	Total	•	Minus	**		=		X\$ 9=			OR	X\$18=	
ξ	Independent		Minus	***		=] [X43=	1	-1	ı	X86=	
	FIRST PRES	SENTATION OF	MULTIPLE	DEPENDENT (CLAIM		!		+	٦,	P		
							L	+145=		o	R	+290=	
							Al	TOTA DDIT. FEI		o	R _{AI}	TOTAL DDIT. FEE	
1		(Column 1)		(Column		(Column 3)							
•		REMAINING AFTER		NUMBE	R	PRESENT	lΓ		ADDI		Γ		ADDI-
-		AMENDMENT		PREVIOUS PAID FO		EXTRA		RATE	TIONA	L		RATE	TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OF	\Box	X\$18=	, <u>, , , , , , , , , , , , , , , , , , </u>
L	Independent	<u> -</u>	Minus	***		=		X43=	 	7		X86=	
1	FIRST PRESE	NTATION OF M	ULTIPLE D	EPENDENT CL	AIM		\vdash		 	-JOF	┧	∧00=	
							L	145=		OF	Ŀ	290=	
					•		ADI	TOTAL DIT. FEE		OA	ÀD	TOTAL DIT. FEE	
T		(Column 1)		(Column	2) (Column 3)			·				
	`	CLAIMS REMAINING	1	HIGHEST					ADDI	7		 -	
		AFTER AMENDMENT		PREVIOUS	LY	PRESENT EXTRA	F	ATE	ADDI- TIONAL		١,	RATE	ADDI- TIONAL
7	otal	*	Minus	PAID FOR			-		FEE	4			FEE
۱,	ndependent	*	Minus	***	- -		L×	\$ 9=		OR	×	\$18=	
F	IRST PRESE	NTATION OF ML	I	TPLE DEPENDENT CLA				43=		OR	>	(86=	
							1	45=		1		290=	
	ie indinestianu	nn 1 is less than the	M FACINITY	IIC CDACE in Inna	· ~			TOTAL		OR	Ľ	TOTAL	
		IUCI FIEVILILLIV PA	MI HAZ INI TL	HC CDACE in Inc.	·		ADDI	T. FEE L	·	OR	ADD	песе	
r 16	nighest Numb	per Previously Paid	For (Total o	or Independent) is	the hig	rhest number fo	ound in	the appr	opriate bo	x in col	umn	1.	į